Welcome

Pre Opening
I will...
Do My Best
To
Be Prepared
To
Lead The Adventure
Introductions & Important Messages
COVID-19 Updates

• xx
Incident and Incident Reporting

• Incident
  • Something unexpected happened
    • Take care of immediate needs first

• Incident report
  • Documenting what happened to learn from this incident
Types of incidents

- Near Miss
  - Does not result in injury, illness, or damage, by definition, but it had the potential to do so

- General Liability
  - Events or allegations of injury, illness, or property damage, including employment, director, and officer issues

- Youth Protection/Membership Infraction
  - Allegations of abuse, violations of BSA guidelines or policies, or inappropriate behavior by a Scout/Scout leader/parent/other
Incident Reporting 101

• Timely, clear, concise, and complete incident reports allow for an appropriate response and an opportunity for analysis while promoting continuous improvement of our programs.

• You can report incidents, near misses, and youth protection/membership infraction incidents to your local council (preferred method in LEC) or enter them yourself.
An incident has occurred, now what

1. Take care of the injured/find a safe place

2. Preserve and document the evidence/take photos if appropriate

3. Complete an incident report and notify your local council
Why is Incident Reporting Needed

• Reports are reviewed to find
  • Trends
  • Best practices

• Protects leaders from false accusations

Timely and complete incident reporting provides BSA with an opportunity for analysis of incidents that occur and promotes continuous improvement of our programs. The sooner a clear, concise, and complete incident report is made, the sooner an appropriate response to the incident can occur.
Why & When to Report an Incident

• Why
  • Helps identify areas for improvement to help prevent recurrence of similar incident

• When
  • Report as soon as possible if an injury or illness cannot be treated by Scout rendered first aid
  • If a medical professional such as a doctor or nurse was needed,
  • Or an ambulance was called.
What happens with the information

• Risk analysis
  • Updates to training modules
  • Helps us to educate ourselves, our youth, and our parents on the risks of planned activities and how to prepare to minimize those risks so we can BE PREPARED

• Educational Potential
  • Incident Reviews based on actual events
  • Safety Moments

• Supports any insurance claims if needed
Incident Review #1
While hiking alone at Philmont Scout Ranch, a 38-year-old Scout crossed a river and tripped, falling face-first into a bank. Upon returning to camp, he went to his tent and fell asleep. The other adult leaders noticed his absence from dinner and went to check on him. After waking him, they discovered he could not remember the events of the previous two days.

Key Points
- Scouting utilizes the buddy system for both youth AND adults so that help can be provided and/or summoned if an injury occurs.
- People who may have suffered a concussion might not be aware of the changes in their own behavior.
- Changes in behavior or a loss of memory suggest significant injury to the brain may have occurred and steps should be taken to seek immediate medical care.

Incident Review #2
A 14-year-old Scout was taking a turn on a rope swing when he fell off and rolled down a hillside. He sustained injuries to his legs and abrasions to his knees. A few days later, he was diagnosed with a mild concussion.

Key Points
- Concussion symptoms may not be noticed initially when other injuries are more apparent. Falls from a height are commonly associated difficulty concentrating, nausea, vomiting, personality changes, sleepiness, forgetfulness, dizziness, loss of balance, a stumbling gait, loss of coordination, and blurry or double vision. The examiner should look for these things following an injury or suspected concussion.
- People with head injuries should rest in quiet, darkened areas away from activities until they receive medical care. Adult leaders should monitor the person for any change in symptoms. It is OK to allow the injured person to sleep if needed, but reading and use of ANY electronic devices should be limited.

Incident Review #3
A 12-year-old Cub Scout fell from the top of a bunk bed, striking his head on the metal frame. He immediately started having blurry vision in both eyes. An adult leader noticed he was dazed and began to assess him for a possible concussion.

The Scouting program includes strenuous physical activities that carry some risk for injury including concussion. A concussion, also known as a traumatic brain injury (TBI), is an alteration of brain function. Concussions may be due to falls or blows to the head that cause the brain to move quickly back and forth. It is important for Scouts and Scouters to: (1) be aware of the risks of concussion, (2) take the appropriate steps to minimize those risks, (3) know how to identify the signs and symptoms of a concussion, and (4) know how to best proceed if someone has a concussion.
Safety Moments

Using a Safety Moment in Scouting Activities

Safety Moments are exactly what the name implies: opportunities to prepare for an activity, review safety measures, and report incidents correctly. Topics of this new series include incident reporting helps, safe use of medication in Scouting, weather-related safety, winter activity, and winter sports.

Read more about using a safety moment in Scouting activities.

Other Safety Tips can be found on the Scouts Canada website.

Search for Safety Moments:
Who Does the Reporting

• At a LEC sponsored event, unit leader will
  • Notify the camp health officer
  • If camp health officer is unavailable, then notify the camp host
  • The camp health officer or camp host will then complete the process and notify the service center

• At unit event, the unit leader will
  • Notify Brittany Dunne at LEC Service Center
  • If unable to contact Brittany, notify your Unit Serving Executive or Unit Commissioner
Who Does the Reporting continued

• Reports eventually will be placed into a system directly to National. This can be done by
  • Council representative  PREFERRED
  • Any Scouter
    • When reported directly to National, the local council is unaware of the incident

• Preferred in the LEC is to send a copy of an incident report form to Brittany Dunne, Program Executive
  • Email: brittany.dunne@scouting.org
  • Mail: Lake Erie Council BSA, 2241 Woodland Ave, Cleveland, OH 44115  ATTN: Brittany Dunne
  • Drop off at Service Center
What Information to Gather

• There is a guide sheet tool for the different types of incidents.
• Helps to make sure all the needed information is collected.
• Basically the 5 W’s + Witness information
  • Who, What, When, Where, Why, plus Witness(es)
• BE SURE CONTACT INFORMATION FOR INFORMANT AND WITNESSES ARE COMPLETE AND CORRECT
# Incident Reporting Tool

(Events or allegations of injury, illness, or property damage, including employment and directors and officer's issues)

## General Incident Details

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident Date</td>
<td>Incident Time (in 24-hour format):</td>
</tr>
<tr>
<td>Report Date</td>
<td></td>
</tr>
<tr>
<td>Date Reported to Council/BSA Location</td>
<td></td>
</tr>
<tr>
<td>Reported by Name</td>
<td></td>
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<tr>
<td>Reported by Email</td>
<td></td>
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<tr>
<td>Reported by Address</td>
<td></td>
</tr>
<tr>
<td>Reported by City</td>
<td>Reported by State:</td>
</tr>
<tr>
<td>Reported by Zip Code</td>
<td></td>
</tr>
<tr>
<td>Council/BSA Location</td>
<td>Location of Incident:</td>
</tr>
<tr>
<td>Specific area where incident occurred:</td>
<td></td>
</tr>
<tr>
<td>Incident Address</td>
<td></td>
</tr>
<tr>
<td>Incident City</td>
<td>Incident State:</td>
</tr>
<tr>
<td>Incident Zip Code</td>
<td></td>
</tr>
</tbody>
</table>

## Description of Incident (clear/concise/complete facts)

Was an Agency or Authority Notified? □ Yes □ No □ Whom:

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## Injury/Illness/Damage Information

<table>
<thead>
<tr>
<th>Claimant Name:</th>
<th>Claimant Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claimant City</td>
<td>Claimant State:</td>
</tr>
<tr>
<td>Claimant Zip Code</td>
<td>Claimant Secondary Phone:</td>
</tr>
<tr>
<td>Claimant Primary Phone</td>
<td>Claimant Secondary Phone:</td>
</tr>
<tr>
<td>Claimant Email</td>
<td></td>
</tr>
<tr>
<td>Claimant Date of Birth</td>
<td>Age of Claimant:</td>
</tr>
</tbody>
</table>

## Witness Information

<table>
<thead>
<tr>
<th>Witness Name:</th>
<th>Witness Address:</th>
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</thead>
<tbody>
<tr>
<td>Witness Email</td>
<td>Witness Email:</td>
</tr>
<tr>
<td>Witness Primary Phone</td>
<td>Witness Secondary Phone:</td>
</tr>
<tr>
<td>Witness Type: Adult □ Youth □ Unknown</td>
<td></td>
</tr>
<tr>
<td>Witness Name:</td>
<td></td>
</tr>
<tr>
<td>Witness Address</td>
<td>Witness Email:</td>
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<tr>
<td>Witness Secondary Phone</td>
<td>Witness Primary Phone:</td>
</tr>
</tbody>
</table>

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## Vehicle Involved (Duplicate if needed)

| Owner of Vehicle:                          | VIN:                                             |
| License State:                             | Vehicle make/model/year:                         |
| Description of Vehicle Damage:            |                                                  |

## Weather Conditions

| Driver Name:                               | Driver Address:                                  |
| Driver City:                              | Driver State:                                    |
| Driver Zip Code                           | Driver Phone:                                    |
| Driver Email:                             |                                                  |

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## Additional Notes

- [Description of Incident (clear/concise/complete facts)]
- [Witness Information]
- [Vehicle Involved (Duplicate if needed)]
- [Weather Conditions]
Youth Protection/Membership Infraction

Incident Information Form

(Accusations of abuse, violations of BSA guidelines or policies, inappropriate behavior by a Scout/Scout leader/parent/other)

Return the completed form to your council's designated user for entry, or upload to Riskconnect.

Submitting this form (in hard copy or through the online reporting system) does not eliminate your responsibility to immediately stop the behavior at issue and to protect the youth nor your obligations under BSA's mandatory reporting of child abuse and any other obligations imposed by state law.

 Incident date: ____________________________ Date incident reported to council: ____________________________

Council/BSA location where incident occurred (if applicable): ____________________________

Incident address: ____________________________ City: ____________________________ State: ____________________________ Zip: ____________________________

Report type: 
□ Suspicion/allegation of abuse
□ BSA policy or guideline violation(s)
□ Other inappropriate behavior by a Scout/Scout leader/parent/other

Details of incident: What alleged victim/target/injured party said, what reporter observed/was told, similar or past incidents involving the victim(s)/target(s)/injured party (parties) or violator(s)/offender(s), etc.

PERSON FILLING OUT THIS FORM:

Scouting position: ____________________________

Address: ____________________________ City: ____________________________ State: ____________________________ Zip: ____________________________

Phone(s): Primary ____________________________ Alternate ____________________________ Email: ____________________________

PERSON WHO REPORTED THIS INCIDENT:

Scouting position: ____________________________

Address: ____________________________ City: ____________________________ State: ____________________________ Zip: ____________________________

Phone(s): Primary ____________________________ Alternate ____________________________ Email: ____________________________

Duplicate as needed.

Alleged Victim/Target/Injured Party Information:

□ Adult □ Youth □ Registered □ Other ____________________________

Council ____________________________ Unit ____________________________ Chartered organization ____________________________

Name ____________________________ DOB ____________________________ Age ____________________________ Gender ____________________________

If a youth, parent(s) information: ____________________________ Name ____________________________

Address: ____________________________ City: ____________________________ State: ____________________________ Zip: ____________________________

Phone(s): ____________________________ Primary ____________________________ Alternate ____________________________ Email: ____________________________

Parent notified? Yes □ No □ if yes, by whom? ____________________________ Date/Time ____________________________

Alleged Policy Violator/Offender Information:

□ Adult □ Youth □ Registered □ Other ____________________________

Council ____________________________ Unit ____________________________ Chartered organization ____________________________

Name ____________________________ DOB ____________________________ Age ____________________________ Gender ____________________________

If a youth, parent(s) information: ____________________________ Name ____________________________

Address: ____________________________ City: ____________________________ State: ____________________________ Zip: ____________________________

Phone(s): ____________________________ Primary ____________________________ Alternate ____________________________ Email: ____________________________

Parent notified? Yes □ No □ if yes, by whom? ____________________________ Date/Time ____________________________

Reports:

Was this incident reported to law enforcement? Yes □ No □ I don't know ____________________________

Name of law enforcement agency: ____________________________

Date reported: ____________________________ Approximate time reported: ____________________________

If applicable, was appropriate children and family services/Child Protective Services agency notified? Yes □ No □ I don't know ____________________________

Name of agency: ____________________________

Date reported: ____________________________ Approximate time reported: ____________________________

Attachments such as photos, statements, and this incident report can be added during online entry and are helpful. Return this completed form to your council's designated user for entry into the BSA's online reporting system, or upload into Riskconnect.
# Near Miss Reporting Tool

(A near miss does not result in injury, illness, or damage, by definition, but it had the potential to do so. This form is a tool to gather information. If an injury has occurred, use the incident reporting tool.)

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<td>Report State:</td>
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</tr>
</tbody>
</table>

**Description of Incident (clear/concise/complete facts):**

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**Was an Agency or Authority Notified?**
- [ ] Yes
- [ ] No

**Near Miss Details**

<table>
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<tr>
<th>Field</th>
<th>Details</th>
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<tbody>
<tr>
<td>Adventure/Program/Event:</td>
<td></td>
</tr>
<tr>
<td>General Classification (Cub Scout/Registered Leader/etc.):</td>
<td></td>
</tr>
</tbody>
</table>

**Lessons Learned (what could be done to prevent future occurrences):**

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**Severity Rating:**
- [ ] Catastrophic-I
- [ ] Critical-II
- [ ] Marginal-III
- [ ] Negligible-IV
- [ ] Unknown

**Witnesses**

(Use back of form to record other details and witness contact information)
Reporting Tips

• Fill out report as completely as possible
  • Remember the 5 W’s plus witnesses
  • Be sure to have accurate contact information for
    • Person submitting form
    • All witnesses

• When in doubt, fill it out

★ Timely, Clear, Concise, Complete ★
Summary

• Incident Reporting helps us to Be Prepared
• Report each of the three types of incidents on proper form
  • Near Miss, General Liability, Youth Protection/Membership
• Reporting helps identify areas for improvement & supports insurance claims
• Report as soon as possible
• KEY: Timely, Clear, Concise, Complete
Resources

- Incident Report Tools (all types of incidents)

- Flowchart/infographic (in FAQ section)

- Incident Reviews

- Safety Moments
On to Breakouts

**Cub Scout**: Fundraisers

**Scouts BSA**: Demonstrate Scout Spirit